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CONFIRMATION NO. 6954

Bib Data Sheet

SERIAL NUMBER 09/885,984	FILING DATE 06/20/2001	CLASS 144	GROUP ART UNIT 3725	ATTORNEY DOCKET NO. P00,1904
RULE				

APPLICANTS

David R. Daniels, Lake Villa, IL;

Edmund Apolinski, Chicago, IL;
Klemens Degen, Weibern, GERMANY;

** CONTINUING DATA *****

This application is a CIP of 09/636,702 08/11/2000 PAT 6,360,798
 (*)Data provided by applicant is not consistent with PTO records.

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 07/11/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	IL	8	10	5
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

26574
 SCHIFF HARDIN, LLP
 PATENT DEPARTMENT
 6600 SEARS TOWER
 CHICAGO , IL
 60606-6473

TITLE

Router tables

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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